

SUPERIOR COURT

STATE OF MAINE

DISTRICT COURT

_____, ss.

Location _____

Docket No. _____

Docket No. _____

Plaintiff

vs.

SUPPLEMENTAL WORKSHEET_____
Defendant**Supplemental Child Support Worksheet**

(For use when parents provide substantially equal care. CV-040 must be prepared first.)

14. Higher income parent's share of basic weekly support
_____ (line 7b) x _____ (line 8) = 14. _____15. Enhanced weekly support entitlement
_____ (line 8) x 1.5 = 15. _____16. Lower income parent's share of enhanced weekly support entitlement
_____ (line 7a) x _____ (line 15) = 16. _____17. Higher income parent's share of enhanced weekly support entitlement
_____ (line 7b) x _____ (line 15) = 17. _____18. Enhanced Support Obligation
_____ (line 17) - _____ (line 16) = 18. _____19. Presumptive Parental Support Obligation
Enter the amount from line 14 or line 18, whichever is less = 19. _____

20. Additional expenses to be shared by parents in proportion to their incomes:

Expense	Weekly Amount	Parent Paying	HIP Share*	LIP Share*
Health Insurance (enter amount from line 9)			\$	\$
Child Care (enter amount from line 10)			\$	\$
Extraordinary Medical Expenses (enter amount from line 11)			\$	\$
*HIP = higher income parent	*LIP – lower income parent	TOTAL:	\$	\$

Adjustment for additional expenses = 20. _____
 (If HIP pays the expense(s), subtract LIP share.
 If LIP pays the expense(s), add HIP share.
 Do not include on line 20 amount(s) HIP pays directly to a provider.)

21. Total weekly support obligation of HIP to be paid to LIP = 21. _____